

Cyprus Thompson Creek

Post Office Box 755
Challis, Idaho 83226
Telephone (208) 879-4327

November 13, 1985

Chief, Water Compliance Section
EPA, Region X, Mail Stop 513
1200 Sixth Avenue
Seattle, Washington 98101

Reference: Cyprus Thompson Creek Mining Company
Permit #ID-002540-2

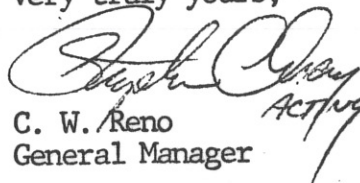
Subject: NPDES Discharge Monitoring Report for October 1985

Dear Sir or Madam:

Enclosed are the discharge monitoring reports for source points 001 and 002 on the Cyprus Thompson Creek Project for the month of October, 1985.

If you have any questions, please advise.

Very truly yours,


C. W. Reno
General Manager

CWR:BM:rk/d

Enclosures

cc: Idaho Dept. of Health & Welfare, Boise Office
File: P-12-e

CYPRUS

NAME CYPRIUS THOMPSON CREEK MINES
 ADDRESS P. O. BOX 62
CLAYTON ID 83227
 FACILITY _____
 LOCATION _____

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

100025402

PERMIT NUMBER

002 A

DISCHARGE NUMBER

DMR NO. 2090-0006
 Approval expires 9-30-85

DISCHARGE TO

RAT HUGHES CREEK

MONITORING PERIOD

FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
85	12	01	85	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

MAJOR (SUBP 03)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.9	*****	8.1		0		
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	5.5 MINIMUM	*****	9.0 MAXIMUM	5.1		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	7.0	9.0		0		
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	20 DAILY MAX	30 DAILY MAX	MCAL		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.007	0.013		*****	*****	*****		0		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***		DAILY	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER C. W. Reno General Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
			208 838-2200	85	11	12	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

NAME CYPRUS THOMPSON DITCH WINE
ADDRESS P. O. BOX 62
CLAYTON IND 227

(2-16) 100025402
PERMIT NUMBER
(17-19) 01 A
DISCHARGE NUMBER

FINAL
DISCHARGE TO BUCKSKILL CREEK

FACILITY
LOCATION
ATTN: M. D. MARTIN, GENL MGR

MONITORING PERIOD
FROM YEAR 85 MO 10 DAY 01 TO YEAR 85 MO 10 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUB) 031
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****			*****					
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	5.5 MINIMUM	*****	9.0 MAXIMUM	SI		WEEKLY GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	NO DISCHARGE					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	20 DAILY AVERAGE	30 DAILY AVERAGE	MG/L		WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****				
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***		DAILY	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE		
C. W. Reno General Manager					
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

NO DISCHARGE

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.) 00049/102985-1246 PAGE OF